



Supervisors' Role In Safety and Health

1 Who Should Attend . . .

This seminar is a must for anyone concerned about health and safety on the job including:

- ▶ Managers concerned about liability and workers' compensation costs
- ▶ Employees who want to learn proper techniques for protecting their safety and health at work
- ▶ Business owners who want to learn about compliance with Michigan Occupational Safety and Health Administration (MIOSHA)

2 Why You Need This Seminar . . .

- ▶ To reduce disabling injuries and illnesses to employees - and to ensure that every worker goes home safe and healthy every day.
- ▶ To reduce the high costs of work-related injuries. Nationally, employers spent an estimated 50.8 billion on wage payments and medical care for workers hurt on the job. (*Liberty Mutual Safety Index 2005*) This is only a portion of the total costs of work-related injuries. Indirect costs such as overtime, training and lost productivity can also burden employers.
- ▶ To enhance your company's bottom line. A strong safety and health commitment not only protects workers, it also reduces workers compensation costs, improves employee morale, and increases production and quality.

3 What You'll Learn . . .

This workshop reviews the duties and responsibilities of the supervisor/manager typical of an effective safety and health management system. Topics include safety and health training, accident investigation, hazard recognition, job safety analysis, and workplace inspections. The program will cover health and safety responsibilities that include self-inspection techniques, job safety analysis, accident investigation, hazard recognition and employee training. This program gives tips to supervision on methods to integrate health and safety into their daily duties and responsibilities. Using MIOSHA standards and required written programs as a baseline, supervisors are given suggestions to improve their safety and health hazard recognition. Motivational techniques are provided to address those who fail to follow safe and healthy work practices.

Agenda

*We offer a flexible
program agenda
to emphasize the
safety and health
topics you
want most.*

- ▶ Identify the Role of Our Supervision
- ▶ Identify the Role of the Executive/
Manager in Safety/Health
- ▶ Provide Techniques to Implement
- ▶ Recognize Supervisor as a Professional
- ▶ Recognize Safety as a Part of
Supervisory Responsibilities
- ▶ Identify Formal Safety Responsibilities
- ▶ Provide Motivational Techniques to
Support Your Safety Efforts

All meetings are accessible and barrier free. Please contact the cosponsor or CET Division, at least two weeks in advance, to request necessary accommodations.

Facilitator

Anthony Neroni was promoted to Occupational Safety Consultant with the Consultation Education and Training Division in January 2003. He has 21 years of service with the State of Michigan including: 6 years with the Michigan Department of Transportation, 12 years as an Occupational Safety Inspector with MIOSHA, and his last 2-1/2 years as Senior Safety Officer. Senior Officers are used on more complex cases and are instrumental in training and coaching other safety officers. Anthony's previous experience includes 10 years of as a machinist, operating various metalworking machines.

Anthony has excellent knowledge of the General Industry Safety Standards and has also received additional certified training in many other areas.



Anthony Neroni
*Occupational Safety Consultant,
MIOSHA, CET Division*

Program Details

DATE:	March 8, 2007	TIME:	Check-in - 8:30 a.m. Program - 9:00 a.m. to 12:00 p.m.
LOCATION:	Days Inn of Manistee 1462 US-31 South Manistee, Michigan	DEADLINE:	Register by March 1, 2007 Please register early!
COST:	\$30 per person Includes course materials.	CONTACT:	Shelly Hyatt - 231.546.7264

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How to Register

Supervisors' Role In Safety and Health

Complete information at right to register by:

► **Phone:** 231.546.7264
► **Fax:** 231.546.7264
► **Email:** seminarsandmore@webtv.net
► **Mail:** Seminars and More
PO Box 2204
Gaylord, MI 49734
Attn: Shelly Hyatt

Name: _____
Company Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____
Fax: _____
Number Attending: _____ @ \$30 each = \$ _____
Mastercard or Visa #: _____
Signature: _____ Exp. Date: _____

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